

Book Reviews

Laboratory Manual of Pharmacology. By A. D. Bush. 251 pp. Illustrated. Philadelphia: F. A. Davis Company. 1919. Price, \$3.50.

If the author's students actually use this book, they spend much more time with him than is given to the study of pharmacology in other medical schools.

The manual is an unusually complete one. A man who has worked his way through it will have a sufficient working knowledge of the more important drugs. It should be useful, not only to the author's students, but as a basis for laboratory courses in other medical schools.

L. E.

Accessory Sinuses of the Nose. By Ross Hall Skillern. 418 pp. 300 Illustrations. 3rd ed. Philadelphia and London: J. B. Lippincott Company. 1920.

This book is a particularly clear and comprehensive treatise on the subject and without question is one of the best in the English language. It gives in a clear and concise manner the anatomy, pathology and treatment of the various diseases of the sinuses; gives a very complete bibliography of those subjects which cannot be treated in detail, and gives references for statements made.

The first one hundred pages are given to general consideration which should be of great interest and value to general medical and surgical practitioners as well as being most worthy of the occasional reviewing by ear, nose and throat specialists.

H. A. F.

A Nurse's Handbook of Obstetrics. By Joseph Brown Cooke. Ninth edition. 468 pages. Illustrated. Philadelphia and London: J. B. Lippincott Company. 1920.

For any nurse who is specializing in obstetrics, it would be difficult to find a better book than this one.

The book is quite complete, not only in the essential details that a nurse should know, but also in interpreting the examinations of the physician, thus adding an absorbing interest to the whole picture. This is all told in simple, yet scientific, phrases so that the nurse is surprised at how much she can really know about the procedure of an obstetrical case.

It can be most enthusiastically recommended to the nurse, to the superintendent of nurses, and even to the physician giving lectures to nurses.

New illustrated colored prints have been added to this edition—also a chapter on prenatal nursing.

M. J.

Laboratory Manual of the Technic of Basal Metabolic Rate Determinations. By Walter M. Boothby, M. D., and Irene Sandiford, Ph. D. Section on Clinical Metabolism. The Mayo Clinic, Rochester, Minnesota, and The Mayo Foundation, University of Minnesota. Octavo volume of 117 pages with 11 tables and charts of explanation. Philadelphia and London: W. B. Saunders Company. 1920. Cloth, \$5 net.

The book is a handy manual for the technician doing this sort of work. The technic is plainly and concisely set forth, and should leave no doubt as to a correct procedure. The tables are convenient and arranged in one manual will save considerable time for the worker. The clinician who would understand the chemistry underlying the basal metabolic rate of the body must turn elsewhere for his information. For this there is a very good bibliography appended.

D. M. E.

Radiography of the Chest. By Walker Overend. 119 pp. St. Louis: C. V. Mosby Company. 1920. Price, \$5.

This book which is the first of two volumes on the roentgen examination of the chest deals en-

tirely with pulmonary tuberculosis. It is concise and well illustrated. A commendable feature is the inclusion of a brief clinical history with each illustration. Perhaps too much space has been given to the subject of classification of pulmonary tuberculosis and too much emphasis laid on nomenclature to the exclusion of detail in descriptions of the roentgen appearances. Taken as a whole, the book will be found very satisfactory as an elementary exposition of the subject.

H. E. R.

Optimistic Medicine. By A Former Insurance Man. 318 pages. Philadelphia: F. A. Davis Company. 1921.

The author here tells not his name,
He keeps himself unknown to fame;
He's but an old insurance man,
Built on an optimistic plan.

Just what audience he would reach
With the things he has to preach,
'Tis hard to tell. We look in vain.
The preface does not this explain.

He takes about three hundred pages
To state that humans of all ages—
Infant and youth, adult and old—
By a physician must be told

How to live and what to eat
To reach old age with temper sweet;
How to avoid each ache and pain
Of the body and the brain.

His optimism is extreme,
That he should think or even dream
That doctors can prevent each ill
That strikes the body, mind, or will.

With anecdotes he illustrates
Quite frequently each point he makes.
Sometimes they seem quite apropos,
But then again they are not so.

It is not worth a doctor's while
To read a book writ in this style.
A layman won't assume the task.
"What audience?" again I ask.

A. L. F.

Surgical Clinics of North America. February, 1921. Volume 1, Number 1 (Philadelphia number). 259 pages. Published bi-monthly. Philadelphia: W. B. Saunders Company. Price per year, \$12.

J. B. Deavor: Pancreatitis. **J. C. DaCosta:** Hydatid cyst of liver. Paget's disease of bones. Fracture of vault and base of skull, tear of dura, laceration of cortex, and hemorrhage from posterior branch of middle meningeal artery. Lethargic encephalitis mistaken for meningeal hemorrhage. Pulsating central sarcome of lower end of humerus. Presenile spontaneous gangrene. **J. G. Clark:** Prolapsus uteri; ultimate results in one hundred cases. **C. H. Frazier:** Clinical lecture on trigeminal neuralgia. **A. P. C. Ashhurst:** Birth injury of right shoulder, neurolysis of brachial plexus. Fracture of tibia: Open reduction. Recurrent posterior dislocation of hip following infantile paralysis, paralytic valgus of right, and calcaneovalgus of left foot. Cystic ovary. Umbilical hernia. Incomplete abortion. Hemorrhoids. Cellulitis of forearm and thigh. Open reduction of fracture of forearm (Dressing). Two cases of effusion into both knees: One syphilitic, the other hemophilic. **J. H. Gibbon:** Amputation of breast for carcinoma; the Stewart incision. **C. F. Nassau:** Epithelioma of lip. **T. T. Thomas:** Method of applying extension with plaster cast fixation in fractures of leg. **J. H. Jopson:** Old fracture of patella. Treat-

ment by open operation, wiring of fragments, and suture of fascia and aponeurosis. Ectopic testicle: Perineal variety: Operation and implantation of testicle in scrotum. Primary hemangiomatous endothelioma of spleen. **G. P. Muller:** Large enchondroma of scapula of many years' duration; excision of tumor and scapula followed by local recurrences. Enchondroma of scapula and long bones. Chondro-osteoma of humerus in young boy. Multilocular cyst of lower jaw, treated by simple excision and followed by cure for a period of three years.

Anaphylaxis and Anti-Anaphylaxis and Their Experimental Foundations. By A. Besredka. 143 pp. St. Louis: C. V. Mosby Company. 1919. Price, \$2.25.

Besredka must be considered the authority par excellence on the subject of desensitization or anti-anaphylaxis, as Victor C. Vaughan appropriately states in the preface to the American Edition of this monograph. It is not surprising to find, therefore, Chapter V of this small book to contain a vast amount of information which is of great practical value to those who are concerned in any form of treatment involving the use of serums, vaccines or the injection of proteins of any kind. The statements on food idiosyncrasies, tuberculin-allergy, etc., are clear and definite. As is well known the idea that the antibody-antigen reaction that causes the shock of anaphylaxis takes place in or upon the cells of the fixed tissues originated with Besredka, who believes that the reaction which determines the shock occurs in certain cells of the central nervous system. It may be remarked here that since, in the guinea pig, the rabbit and the dog, the pathological changes of anaphylaxis have been shown to occur independently of the central nervous system, the latter phase of Besredka's theory, which this author maintains in the monograph is evidently untenable. The theories relating to anaphylaxis are dealt with in Chapter VII. The specialist misses a number of important observations and probably desires a more detailed discussion of the various hypotheses, which have been offered to account for the phenomena of anaphylaxis and allergy.

The concluding Chapter VIII, "Recent Work on Anaphylaxis," by Dr. Gloyne, is excellent, and supplements in many respects the presentation of Besredka. As a whole it can be said that a complicated subject is explained in an attractive manner and this monograph should be consulted by all medical men, who have already made themselves familiar with the elements of this subject.

K. F. M.

Books Received—July, 1921

Books received are acknowledged in this column, and such acknowledgment must be regarded as a sufficient return for the courtesy of the sender. Selections will be made for review in the interests of our readers and as space permits.

Surgical Clinics of North America. April, 1921. Vol. I, No. 2. Publisher, W. B. Saunders Co.

Typhus Fever With Particular Reference to the Serbian Epidemic. Publisher, Harvard Press University.

Intestinal Flora. By Rettger and Chaplin. Publisher, Yale University.

Allen Treatment of Diabetes. By Hill & Eckman. Publisher, W. M. Leonard.

Infections of the Hand. By Kanavel. Publisher, Lea & Febiger.

Roentgen Interpretation. By Holmes & Ruggles. Publisher, Lea & Febiger.

Diseases of the Skin. By Ormsby. Publisher, Lea & Febiger.

Nutrition and Clinical Dietetics. By Carter-Howe & Mason. Publisher, Lea & Febiger.

Evolution of Disease. By Danysz and Rackemann. Publisher, Lea & Febiger.

Medicine Before the Bench

In this column from time to time will appear comments on court decisions and proceedings affecting public health laws, physicians and surgeons, the conduct of hospitals, laboratories, X-ray and all the agencies of modern medicine.

LEGAL LIABILITY FOR TRANSMITTING INFECTION

Both civil and criminal courts have recently rendered decisions declaring that the transmission of venereal disease lays the offender open to criminal and civil action.

In Oklahoma a man has been sentenced to five years in the penitentiary for infecting a girl with syphilis. In Nebraska the court upheld a doctor who warned a hotel keeper that one of his patients, a guest at the hotel, had syphilis and had refused treatment and was consequently a menace to the public health. In North Carolina a woman has been awarded \$10,000 damages against her husband for a similar infection, and the Supreme Court has upheld the judgment.

The Nebraska case is important because it asserts that a physician's duty to protect the public health may, under certain circumstances, transcend his duty to hold his patient's confidence inviolable. The North Carolina case is also important because it sets aside in this particular case the legal barrier that prevents a wife from testifying against her husband and bringing suit against him.

All three cases are valuable in counteracting incorrect statements, often made, that the venereal disease law falls almost exclusively on women and lets men go free. State laws, of course, govern in all such cases, but the fact that every State in the Union has now adopted many, if not all, of the venereal disease laws, gives ground for expecting similar action in other States. Certainly the wide dissemination of the three decisions should go far to curb diseased persons who deliberately expose others to infection.

Curiously enough, the District of Columbia is the only part of continental United States that has no venereal disease laws. Congress, which makes the laws for the district, has not yet acted.

The fact that the North Carolina decision makes it likely that marriage will henceforth be no adequate defense against a suit for transmitting infection will probably hasten the adoption by the States of laws requiring every applicant for a marriage license to present a certificate by a reputable doctor certifying that he is free from venereal disease and providing that without this no license shall be issued.

Twenty States have already adopted laws forbidding persons with venereal disease to marry; seven of these—New Hampshire, New Jersey, North Carolina, Oregon, Washington and West Virginia—having acted during the present year's sessions. Similar bills are now pending in several States.

All of the twenty States do not require medical examination and certification that the applicant is free from venereal disease. "Such certificate should be required in every State," insists the Public Health Service. "Any decent man with an uncured infection who marries does so either because he does not realize the seriousness of his action or because he believes that he is cured. The necessity for an examination should bring its seriousness home to him and should be welcomed by him as a protection for his wife and children. No real man should object to a medical examination required by law."

Of course those that hold the thought that disease is non-existent and those that believe that thumping the spine is the proper procedure demur to these decisions recently rendered.